Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10633681

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			15				П	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	ASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			/5_ minus 20=		*0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3_ minus 3 =		*60			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT					· <u>·</u>			+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	<u> </u>	TOTAL		, 1	TOTAL		
CLAIMS AS AMENDED - PART II								•			OTHER		
_		(Column 1)	(Column 2 HIGHEST			(Column 3) SMALL I			NTITY	OR	SMALL		
٨		CLAIMS REMAINING		NUM		PRESENT			ADDI-			ADDI-	
AMENDMENT,		AFTER AMENDMENT		PREVIO PAID	DUSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF M	Minus	***	F.C.L.AUNA	=		X42=		OR	X84=		
<u> </u>	FINST PRESE	NIATION OF IM	JETIPLE DEF	ENDEN	CLAIM			+140=		OR	+280=		
							L	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur	(Column 2) (Column 3)			DII. 1 LL 5			7.0011.1221		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	!	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	;	X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MI	Minus	***	F CL AINA	=		X42=		OR	X84=		
L	TINGT FILESE	INTATION OF WI	JULIU DEF	CIADEIAI	CLAIM			+140=		OR	+280=		
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)	,	(Colu		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	;	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T CL A184	=		X42=		OR	X84=	·	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT						-	- 140=		OR	+280=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												